

Baptist Credit Union
5815 IH 10 West
San Antonio, TX 78201-2800

210-525-0100
Fax - 210-525-0383

Change of Name & Address Request

Account Number: _____ Effective Date: _____

Members Name: _____

Members Previous Name (If Name Changed) _____

Note - Name change requires Social Security Card or letter attached.

Old Address: _____

City, State and Zip Code

New Address: _____

City, State and Zip Code

Physical Address Required if PO Box is listed above:

Physical Address: _____

City, State and Zip Code

Phone Numbers: Home: _____ Cell: _____ Work: _____

Email Address _____

Signature: _____

Credit Union Use Only

Signature Verified by MSR: _____ Entered into System by MSR: _____

Member Contact Date ____ Debit Card App: ____ Loan Dept: ____ IRA Dept: ____

RETURN TO Member Service Dept. when completed.